# 9566,0010 SUPPORT PAYMENTS

# CHAPTER 9566 DEPARTMENT OF HUMAN SERVICES SUPPORT PAYMENTS

9566,0010 SUPPORT PAYMENTS.

## 9566.0010 SUPPORT PAYMENTS.

Subpart 1. Notice. The forms in subparts 2 and 3 can be used by individuals who are obligated to pay child support or maintenance and by individuals to whom child support or maintenance is owed. The forms can be used to request modification of existing court orders such as a cost-of-living adjustment (COLA). The forms were not designed to bring other matters before the court.

The terms of a court order regarding maintenance or child support may be modified upon a showing of one or more of the following:

- A. substantially increased or decreased earnings of a party;
- B. substantially increased or decreased need of a party;
- C. receipt of public assistance; or
- D. a change in the cost-of-living for either party as measured by the Federal Bureau of Labor Statistics.

The forms can be used by an individual representing themselves or by their attorney. The forms are not a substitute for use of an attorney.

Completion of these forms will not guarantee that you will be successful in the court hearing.

The papers must be typed in triplicate, be properly completed, notarized, and filed with the court administrator having jurisdiction over the matter. The required fees must be paid, and the other party must be properly served with a copy of these papers. Proper legal procedures must be adhered to or your motion may never be scheduled or may be dismissed by the court.

These papers have been intended for use by a wide variety of individuals who may have unique reasons for making a motion. The forms may not be applicable for everyone and may not, therefore, meet everyone's needs.

DISTRICT/COUNTY COURT

Subp. 2. Notice of motion and motion.

STATE OF MINNESOTA

COURT DIVISION OF MOTION OTION
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# **MINNESOTA RULES 1991**

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SUPPORT PAYMENTS 9566.00	1	0
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• .	(signature, name, address,
• • • •	and telephone number of
	moving party.)
Subp. 3. Custodial parent's affidavit	. •
•	
STATE OF MINNESOTA	DISTRICT/COUNTY COURT
COUNTY OF	JUDICIAL DISTRICT
	FAMILY COURT DIVISION
Petitioner	<b>CUSTODIAL PARENT'S</b>
-vs-	AFFIDAVIT
-42-	File Number
Respondent	The indinoer
<u>-</u>	
	, deposes and says: (check appropriate
tems)	
That I am the petitioner/respond	ent (circle one) in the
above-entitled action.	,
That I am the custodial parent of	•
Name:Birthdate:	
Name: Birthdate:	
Name:Birthdate:	
That the respondent/petitioner, h	nereinafter referred to as
the obligor, by order of the	_District/County Court
dated, was ordered to ma	
of \$ per (week/month	
for the support of said child(ren).	
That at the time of the above ord	er, I was (check
appropriate box):	
Separated	·
Divorced	·
Unmarried and	
Living alone with my	child(ren)
Living with relatives	•
Sharing a household	with nonrelatives
Remarried, and my s	
(0	company or
occupation) and earr	
week/month (circle o	
That my net monthly income at t	he time of the order was
\$ per month from	
That I also received Food Stamps	
That my net monthly income at t	he present time is \$
from	
	te of Order Present Date
Charge Account: (list)	
	<del></del>
TOTAL MONTHLY EXPENSES	

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## 9566.0010 SUPPORT PAYMENTS

That, to the best of my knowledge, the obligor is currently employed at \_\_\_\_\_ and earns \$\_ with a monthly net income of \$\_ That, to the best of my knowledge, at the present time of the above child support order, the obligor was employed at \_\_\_\_ (specify if unemployed) and earned \_ per \_ That at the present time, the obligor is: Remarried and his/her spouse is employed at \_\_\_\_ Unmarried That I request an increase in my child support due to: (optional) Substantially increased or decreased earnings of a party. \_\_\_ Substantially increased or decreased need of a party. Receipt of public assistance. \_\_ A change in the cost of living for either party as measured by the Federal Bureau of Statistics. \_ Other (please explain): \_ FURTHER YOUR AFFIANT SAYETH NOT Signature of Affiant Subscribed and sworn to before (signed before notary public) me this \_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_

Notary Statutory Authori

Statutory Authority: MS s 518.64 History: 1Sp1986 c 3 art 1 s 82 10654